Fill in this inform	nation to identify your case:	
Debtor 1	Raza Gilani	
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
Case number	19-15577	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official F	orm 106I	MM / DD/ YYYY

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r1	Debtor 2 or non-filing spouse
	If you have more than one job,	Emmlerment status	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed
	employers.	Occupation	Direc	tor	Scheduler
	Include part-time, seasonal, or self-employed work.	Employer's name	Amer	ica Works of New Jersey	Home Instead
	Occupation may include student or homemaker, if it applies.	Employer's address		Market Street delphia, PA 19102	West Chester, PA 19382
	How long employed t		nere?	4 years	3 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 9,461.54 \$ 2,916.66

3. Estimate and list monthly overtime pay.

3. +\$ 550.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 10,011.54 \$ 2,916.66

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Raza Gilani		C	Case i	number (<i>if k</i>	nown)	19-1	5577		
			-		For	Debtor 1		For	Debtor	2 or	
								non	-filing s		
	Cop	by line 4 here	4.		\$	10,01	1.54	\$_	2,	916.66	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	l.	\$	2,15	5.52	\$		547.58	
	5b.	Mandatory contributions for retirement plans	5b		\$	<u> </u>	0.00	\$		0.00	-
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		0.00	_
	5e.	Insurance	5e		\$	1,02		\$_		0.00	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		\$ -		0.00	\$_ \$		0.00	_
	5h.	Other deductions. Specify:	5h		\$ —			+ \$-		0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	3,17		\$		547.58	=
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	6,83		\$		369.08	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				,			•		-
		monthly net income.	8a	١.	\$		0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$		0.00	\$		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			Ф.		2 20	ф.		0.00	-
	8d.	settlement, and property settlement. Unemployment compensation	8c 8d		\$_ \$		0.00	\$_ \$		0.00	_
	8e.	Social Security	8e		\$ _		0.00	\$ 		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$		0.00	-
	8g.	Pension or retirement income	_ 8g		\$		0.00	\$_		0.00	_
	8h.	Other monthly income. Specify:	_ 8h		\$			+ \$		0.00	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S		0.00	\$		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,834.90	+ \$	2,3	369.08	= \$	9,203.98
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	depe							∍ J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	9,203.98
13	Dο	you expect an increase or decrease within the year after you file this form	?							monthl	y income
. 0.		No. Yes. Explain:									

Official Form 106l Schedule I: Your Income page 2

						1		
Fill	in this informat	tion to identify yo	ur case:					
Deb	otor 1	Raza Gilani				Che	ck if this is:	
							An amended filing	
1	otor 2							ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ted States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
Cas	e number 19	-15577						
(If k	nown)							
Of	fficial Fo	rm 106J				•		
S	chedule	J: Your I	Exper	ises				12/1
Be info	as complete a ormation. If me mber (if know	and accurate as	possible. eded, atta ry question	If two married people a ch another sheet to this				
1.	Is this a join							
	■ No. Go to	line 2.						
	_		in a separ	ate household?				
		0	•					
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expense	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ Na					
۷.	•	•	☐ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		13	■ Yes
								□ No
					Daughter		18	■ Yes
								□ No
					Mother		78	■ Yes
								□ No
					Father		80	■ Yes
3.	expenses of yourself and	enses include f people other th d your depende ate Your Ongoii	han nts? □	No Yes				
Est	imate your ex	penses as of yo	our bankrı	uptcy filing date unless y is filed. If this is a sup				
the		n assistance and		government assistance sluded it on <i>Schedule I:</i>			Your expe	enses
•		,						
4.		r home owners		ses for your residence. r lot.	Include first mortgage	e 4. :	\$	1,507.72
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. 3	\$	874.75
		rty, homeowner's	s, or renter	's insurance		4b.	·	120.00
		•		ıpkeep expenses		4c. 3	\$	150.00
_		owner's associat				4d.	·	0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	ome equity loans	5.	5	0.00

Deb	otor 1	Raza Gil	ani	Case nun	nber (if known)	19-15577
6.	Utilitie	es:				
-			, heat, natural gas	6a.	\$	450.00
	6b.	Water, sev	wer, garbage collection	6b.	\$	88.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
	6d.	Other. Spe	ecify: cable, internet	6d.	\$	320.00
7.			ekeeping supplies	7.	\$	690.00
8.			children's education costs	8.	\$	500.00
9.	Clothi	ing. laund	ry, and dry cleaning		\$	220.00
		-	products and services	10.	· -	250.00
11.			ntal expenses	11.		360.00
			Include gas, maintenance, bus or train fare.		·	
			ar payments.	12.	\$	380.00
13.			clubs, recreation, newspapers, magazines, and boo	ks 13.	\$	210.00
			ributions and religious donations	14.	\$	200.00
	Insura		•		·	
			nsurance deducted from your pay or included in lines 4 c	or 20.		
		Life insura		15a.	\$	0.00
	15b.	Health ins	surance	15b.	\$	0.00
	15c.	Vehicle in	surance	15c.	\$	260.00
			rance. Specify:	15d.	\$	0.00
16			nclude taxes deducted from your pay or included in lines			0.00
	Specif	fy:		16.	\$	0.00
17.			ease payments:		_	
			ents for Vehicle 1	17a.	·	463.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe		17c.	·	0.00
		Other. Spe		17d.	\$	0.00
18.			of alimony, maintenance, and support that you did your pay on line 5, Schedule I, Your Income (Official		\$	0.00
19.	Other	r pavments	s you make to support others who do not live with y	ou.	\$	0.00
	Specif		,	19.	·	0.00
20.	•	,	erty expenses not included in lines 4 or 5 of this for			
			s on other property	20a.		0.00
		Real estat		20b.	·	0.00
			homeowner's, or renter's insurance	20c.	· -	0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
			ner's association or condominium dues	20d. 20e.	· -	0.00
21					*	
21.	Other	r: Specify:	parent'scare		+\$	1,500.00
22.	Calcu	ılate your	monthly expenses			
			through 21.		\$	8,773.47
	22b. C	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official F	orm 106J-2	\$	
	22c. A	Add line 22	a and 22b. The result is your monthly expenses.		\$	8,773.47
23	Calcu	ilate vour	monthly net income.			·
۷٥.		-	12 (your combined monthly income) from Schedule I.	23a.	\$	9,203.98
			,	23a. 23b.	·	
	230.	Copy your	r monthly expenses from line 22c above.	230.	-φ	8,773.47
			your monthly expenses from your monthly income.			400.54
		The result	is your monthly net income.	23c.	\$	430.51
24.	For exa	ample, do yo cation to the	an increase or decrease in your expenses within the ou expect to finish paying for your car loan within the year or do terms of your mortgage?			ease or decrease because of a
	■ No		Evaluis hans			
	☐ Ye	es.	Explain here:			